

Transition to Independence Program

Service Chapter 462-01

**North Dakota Department of Human Services
600 East Boulevard Dept. 325
Bismarck, ND 58505-0250**

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Transition to Independence Program 642-01

Objective 642-01-01

(Revised 8/1/11 ML #3277)

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1. To assist transition aged individuals who are at risk to successfully transition into adulthood.
2. To help transition aged individuals who are at risk obtain education/employment
3. To provide transition aged individuals who are at risk training in daily living skills, budgeting and financial management skills, obtain adequate housing, appropriate counseling services, substance abuse prevention, and preventative health activities.
4. To provide transition aged individuals ongoing supportive services through wraparound case management.
5. To provide appropriate services to complement efforts to achieve self-sufficiency and to assure that program participants recognize and accept personal responsibility for preparing and making the transition from adolescence to adulthood.

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Scope of Services 642-01-05

(Revised 8/1/11 ML 3277)

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The Transition to Independence Program provides Transition to Independence Process (TIP)- wraparound case management services for transition aged individuals who are at risk between the ages of 14-24. The Transition to Independence Program also provides technical assistance to other services providers who are working with transition aged youth / young adults.

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Outcomes 642-01-10

(Revised 8/1/11 ML 3277)

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1. Individuals shall have sufficient economic resources to meet their daily needs.
2. Individuals will obtain and maintain adequate housing.
3. Individuals will have employment and/or educational goals.
4. Individuals shall have an awareness of community resources and services (both formal and informal) that are available to them.
5. Individuals receiving services will diminish or eliminate illegal/high risk behaviors and work towards making healthier life choices.

Definitions 642-01-15

(Revised 8/1/11 ML 3277)

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1. Department: the Department of Human Services.
2. Independent living skills: includes self-advocacy; the sufficiency to economically meet one's daily needs; to have a safe and stable place to live; ability to attain academic, vocational, or educational goals; the ability to develop a sense of connectedness; ability to diminish or eliminate illegal or high-risk behaviors; and an understanding of how to access physical and mental health services.
3. Individualized assessment: the process that each service provider uses to determine the needs and appropriate services.
4. In-home supports: supports provided to a youth, the youth's family, or both, in the home environment, including mentoring, individual and family training, and respite care.
5. Single plan of care or Person Centered Treatment Plan: a plan of care that identifies needs, tasks, goals, and the safety plan of the individual based on the unique strengths, values, and needs.
6. Transition-aged individuals at risk: individuals between 14-24 years of age, who are at risk due to deprivation or other activities, resulting in the individual being involved with the foster care or juvenile justice system; serious mental illness or serious disabilities that do not qualify the youth for developmental disabilities case management, partnerships, extended care services; or have suicidal tendencies.
7. Emotional Behavior Disorder: individuals with severe emotional disturbances or a behavior disorder.
8. Vocational rehabilitation: Employment-focused programs that help eligible individuals with physical or mental disabilities improve their employment opportunities by assisting with competitive employment and increased independence.
9. Wraparound: a strength-based philosophy of care involving the youth/young adult and family that results in an individualized, community-based plan of care
10. Transition to Independence Process: an evidence-supported wraparound model that demonstrates improvement in real-life

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- outcomes for youth/young adults with emotional and behavioral difficulties.
11. Deprivation "Deprived" CHAPTER 27-20 UNIFORM JUVENILE COURT ACT defines a deprived child as one who:
- a. Is without proper parental care or control, subsistence, education as required by law, or other care or control necessary for the child's physical, mental, or emotional health, or morals, and the deprivation is not due primarily to the lack of financial means of the child's parents, guardian, or other custodian;
 - b. Has been placed for care or adoption in violation of law;
 - c. Has been abandoned by the child's parents, guardian, or other custodian;
 - d. Is without proper parental care, control, or education as required by law, or other care and control necessary for the child's well-being because of the physical, mental, emotional, or other illness or disability of the child's parent or parents, and that such lack of care is not due to a willful act of commission or act of omission by the child's parents, and care is requested by a parent;
 - e. Is in need of treatment and whose parents, guardian, or other custodian have refused to participate in treatment as ordered by the juvenile court;
 - f. Was subject to prenatal exposure to chronic or severe use of alcohol or any controlled substance as defined in chapter 19-03.1 in a manner not lawfully prescribed by a practitioner; or
 - g. Is present in an environment subjecting the child to exposure to a controlled substance, chemical substance, or drug paraphernalia as prohibited by section 19-03.1-22.2
12. US Citizen: The status of being a native born or naturalized citizen of the United States.
13. North Dakota Resident: the status of having an actual residence in a particular jurisdiction, and an intention to make a permanent home in the jurisdiction. For residency guidelines see: Residency Issues Under North Dakota Law @ <http://www.legis.nd.gov/assembly/60-2007/docs/pdf/99101.pdf>

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Legal Authority 642-01-20

(Revised 8/1/11 ML 3277)

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Statutory authority for the Transition to Independence Program comes from the North Dakota Century Code.

Authority Reference is:

- North Dakota Century Code [50-06-34](#)
- N.D.C.C. Administrative Rule [75-03-37](#) describes the authority given the Department of Human Services to develop the Transition Aged Youth at Risk Program (Transition to Independence Program).

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Organizational Responsibilities 642-01-25

(Revised 8/1/11 ML 3277)

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The Transition to Independence Program is administered by the Department of Human Services Division of Mental Health and Substance Abuse Services. The development of this program was established through collaborative efforts with the Division of Vocational Rehabilitation Services, Children and Family Services, and the Regional Human Service Centers.

The Regional Human Services Centers are responsible to facilitate the Transition to Independence Program to eligible clients.

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Division of Mental Health and Substance Abuse Services 642-01-30

(Revised 8/1/11 ML 3277)

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1. Provide administrative oversight of the program including technical assistance and training
2. Seek/provide possible federal funding
3. Facilitate the statewide advisory council
4. Prepare and update policy and procedures
5. Provide consultation on a case by case basis as necessary

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Regional Human Service Centers 642-01-35

(Revised 8/1/11 ML 3277)

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Identify a Transition Facilitator to administer the program as follows:

1. Establish a flex fund account and procedures to access the funds.
2. Obtain and maintain wraparound certification.
3. Establish and facilitate a regional subcommittee representative of the various system partners in their region.
4. Participate on the Transition to Independence State Wide Advisory Council.
5. Complete SED checklist and SMI checklist to determine case management eligibility.
6. Forward referrals to appropriate unit if individual youth is eligible for case management services (SED/SMI/DD).
7. Provide Transition to Independence Process case management for individuals (14-24) who do not otherwise have a designated case manager and meet TIP eligibility criteria. See supplemental TIP manual for case management guidelines.
8. Submit requests for flexible funds to their supervisor and/or program administrator.
9. Coordinate services/referrals with other units within the human service center and community service providers.
10. Provide technical assistance and consultation to community partners and other case managers working with this population.
11. Complete all required paperwork and record time in ROAP according to Human Service Center policy and procedures.
12. Develop a person-centered treatment plan in ROAP.
13. Staff each case with the Multi-Disciplinary Clinical Consultation (MDCC) team within 20 working days in accordance with Human Service Center Licensure.
14. Review person-centered treatment plan at a minimum of once quarterly.

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Transition to Independence Program Eligibility Criteria **642-01-40**

(Revised 8/1/11 ML 3277)

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Transitioned aged individuals between the ages of **14 years old to 24 years old** at risk due to:

1. Deprivation or other actives resulting in individual being involved with or at risk of involvement in the foster care or juvenile justice system.
2. Serious mental illness or serious disabilities that do not qualify the individual for developmental disabilities case management, SED/SMI case management.
3. Suicidal tendencies.
4. Do not meet seriously emotional disturbed or seriously mentally ill eligibility criteria.

Individual who are a:

1. US Citizen.
2. North Dakota Resident.

Consult with the Children's Mental Health Administrator at the State office on questions related to eligibility status.

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Application Process to the Transition to Independence Program 642-01-45

(Revised 8/1/11 ML 3277)

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1. Individuals will complete the Transition to Independence Program Application form.
2. Individuals will complete an authorization to disclose or a multi-agency release of information.
3. Transition Facilitator will complete the SED check list if individuals younger than 18 years of age or the SMI check list if the individual is 18 years of age or older. The individual will be referred to appropriate case management services if eligible. Referral denials (internal & external) must be received in writing and documented in the case notes.
4. Transition Facilitator will review all applications with their supervisor to determine eligibility.
5. Individuals will complete Human Service Center Intake & financial paperwork.
6. Title IXX screenings will be completed on all individuals due to the likeliness of applicants being referred on for other services provided at the Human Service Center. The Title IXX do not need to be completed prior to receiving TIP services.

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Services 642-01-50

(Revised 8/1/11 ML 3277)

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Services to an individual must be appropriate to that individuals needs.

Services will be provided by the Department of Human Services Regional Human Service Centers and by community providers.

Services provided by the Human Service Centers or by community providers under this program shall include but are not limited to the following:

1. Individualized assessments to determine the needs and appropriate services;
2. Complete internal and external referrals according to human service policy;
3. Independent living skills including self-advocacy training;
4. Vocational rehabilitation services for transitioning students from high school to employment or post secondary education;
5. In-home support, mentors, individual and family training, and respite care;
6. Substance abuse assessment and treatment;
7. Psychological and psychiatric evaluation and treatment;
8. Individual, group, and family therapy services;
9. Case aid services;
10. Flexible funding;
11. Crisis residential services;
12. When appropriate utilize the Ansell Casey Life Skills a statewide independent living skills curriculum for youth and families listed below to assess independent living skills as appropriate.

<http://www.caseylifeskills.org/index.htm> (site overview)

http://www.caseylifeskills.org/pages/res/res_ACLSAGuidebook.htm#2 (guidebook)

<http://www.caseylifeskills.org/pages/lp/LSG%20Version%2012-28-04.pdf> (resources)

Caseload Facilitation/Management 642-01-55

(Revised 8/1/11 ML 3277)

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1. Ratio of young people to transition facilitator does not exceed 15 to 1.

Supervisor will be responsible to take into consideration such factors as the following may necessitate requiring a lower ratio of young people per facilitator: The number of children dependent on the transition aged youth/young adult; travel time for service delivery; severity level of Emotional Behavior Disorder (E.B.D.), degree of risk vs. stability in their home, school, and/or employment placements; availability of developmentally-appropriate, appealing and effective supports and services in the community.

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Service Codes 642-01-60

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Transition to Independence RU #563

Service Code Manual: <P:\So Doit\ROAP Reference\CODING\Service Coding manual>

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Confidentiality Statement 642-01-65

(Revised 8/1/11 ML 3277)

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“The Department is committed to protecting your privacy. Any personal health information about you that is generated by this Department or received from health care providers will be kept confidential to the full extent required by the law. The law requires us to maintain the privacy of protected health information, to provide you with this notice, and to abide by what this notice says. We may change what this notice says but will provide you with information about any changes made if you are then receiving services from the Department or upon your request.” - North Dakota Department of Human Services/HIPAA DN900

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Release of Information 642-01-70

(Revised 8/1/11 ML 3277

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The multi-agency release of information, [SFN 970](#) or Authorization to Disclose Information [SFN 1059](#) will be completed.

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Grievance Procedure 642-01-75

(Revised 8/1/11 ML 3277)

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If for any reason, a youth/young adult is not satisfied with a service or how the case is being managed, a grievance can be filed. Human service center policy will be followed regarding this procedure.

Client Rights and Appeals 642-01-80

(Revised 8/1/11 ML 3277)

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Discrimination means treating someone differently because of a particular characteristic such as race, skin color, sex, age, disability, or religion.

In North Dakota, people applying for or participating in programs and activities funded by the federal Department of Health and Human Services and the North Dakota Department of Human Services cannot be discriminated against because of race, color, national origin, age, sex, religion, political affiliation, disability, or status with respect to marriage or public assistance.

Anyone who believes he or she has been discriminated against by service providers covered under these provisions has 180 days to file a complaint after an alleged discriminatory act. To file a complaint, complete the Civil Rights Complaint Form, [SFN 143](#).

If the youth/young adult is denied services for any reason, that information will be provided to them in writing. Please reference the above procedure for an appeal or grievance.

Termination from the Transition to Independence Program 642-01-85

(Revised 8/1/11 ML 3277)

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1. Individuals may choose to leave the program.
2. Upon reaching the age of 25, if an individual continues to need and request services, the individual will be referred to the appropriate service providers or agencies. If the individual is involved in therapy or other services at the human service center, the case would be transferred to the most appropriate staff.
3. If the individual is not participating in the program on a consistent, appropriate basis, they may be subject to termination. In this case, it's recommended that a staffing be held with the direct program supervisor to discuss the circumstances and make a decision. Results of the staffing will be documented in the case file.
4. If the individual "comes and goes" from the program, this is to be documented in the case file. The case will remain open in the meantime while attempts are made to re-engage the individual. The Transition Facilitator will document all attempts to contact individuals in case notes.
5. If safety of the Transition Facilitator or any other staff providing services is at risk, a staffing will be held to determine the ongoing provision of the program/services provided. The decision to close the case will be documented in the case file. Correspondence indicating case closure will be sent to the individual. A copy of the correspondence will be retained in the case file.
6. If the mental health of the individual deteriorates, it may be necessary to reassess for additional referrals and participation in the program.

Regional Transition to Independence Subcommittees 642-01-90

(Revised 8/1/11 ML 3277)

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A subcommittee will be formed in each of the eight human service center regions.

The transition facilitator will facilitate the regional transition to independence subcommittees and / or designate a subcommittee member to serve on the statewide transition advisory council.

Regional subcommittee will consist of representatives of the various system partners such as education, juvenile justice, child welfare, tribal representatives, vocational rehabilitation, parents and youth, partnerships care coordinator, adult mental health case management services, housing authority, and community action. Members are selected based on their knowledge, understanding, and interest in the needs of transition-aged youth at risk. The purpose of the regional subcommittee is to advise the regional human service center on program and policy issues, delivery of services, and methods for reaching consumers.

The regional subcommittee will meet on a regular basis (minimum of quarterly) as determined by the subcommittee and may combine with an already established transition committee.

Representation from the regional subcommittee will attend the State Wide Transition to Independence Interagency Council meetings and provide updates on a quarterly basis.

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State Wide Transition to Independence Interagency Advisory Council 642-01-95

(Revised 8/1/11 ML 3277)

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A statewide Transition to Independence Interagency Advisory Council will be established that consists of representatives of the various system partners such as education, juvenile justice, child welfare, tribal representatives, transition facilitators, vocational rehabilitation, legislative assembly, parents and youth. Members will be selected based on their knowledge, understanding, and interest in the needs of transition-aged youth/young adults who are at risk. The advisory council will advise the Department concerning program and policy issues, delivery of services, and methods for reaching potential consumers.

The state-wide Council will meet on a regular basis (quarterly) as determined by the council. The council will be facilitated by the program administrator from Mental Health & Substance Abuse.

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Objective 642-01-01

(Revised 8/1/11 ML #3277)

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1. To assist transition aged individuals who are at risk to successfully transition into adulthood.
2. To help transition aged individuals who are at risk obtain education/employment
3. To provide transition aged individuals who are at risk training in daily living skills, budgeting and financial management skills, obtain adequate housing, appropriate counseling services, substance abuse prevention, and preventative health activities.
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Scope of Services 642-01-05

(Revised 8/1/11 ML 3277)

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The Transition to Independence Program provides Transition to Independence Process (TIP)- wraparound case management services for transition aged individuals who are at risk between the ages of 14-24. The Transition to Independence Program also provides technical assistance to other services providers who are working with transition aged youth / young adults.

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Outcomes 642-01-10

(Revised 8/1/11 ML 3277)

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1. Individuals shall have sufficient economic resources to meet their daily needs.
2. Individuals will obtain and maintain adequate housing.
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Definitions 642-01-15

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 - b. Has been placed for care or adoption in violation of law;
 - c. Has been abandoned by the child's parents, guardian, or other custodian;
 - d. Is without proper parental care, control, or education as required by law, or other care and control necessary for the child's well-being because of the physical, mental, emotional, or other illness or disability of the child's parent or parents, and that such lack of care is not due to a willful act of commission or act of omission by the child's parents, and care is requested by a parent;
 - e. Is in need of treatment and whose parents, guardian, or other custodian have refused to participate in treatment as ordered by the juvenile court;
 - f. Was subject to prenatal exposure to chronic or severe use of alcohol or any controlled substance as defined in chapter 19-03.1 in a manner not lawfully prescribed by a practitioner; or
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1. Provide administrative oversight of the program including technical assistance and training
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Regional Human Service Centers 642-01-35

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2. Obtain and maintain wraparound certification.
3. Establish and facilitate a regional subcommittee representative of the various system partners in their region.
4. Participate on the Transition to Independence State Wide Advisory Council.
5. Complete SED checklist and SMI checklist to determine case management eligibility.
6. Forward referrals to appropriate unit if individual youth is eligible for case management services (SED/SMI/DD).
7. Provide Transition to Independence Process case management for individuals (14-24) who do not otherwise have a designated case manager and meet TIP eligibility criteria. See supplemental TIP manual for case management guidelines.
8. Submit requests for flexible funds to their supervisor and/or program administrator.
9. Coordinate services/referrals with other units within the human service center and community service providers.
10. Provide technical assistance and consultation to community partners and other case managers working with this population.
11. Complete all required paperwork and record time in ROAP according to Human Service Center policy and procedures.
12. Develop a person-centered treatment plan in ROAP.
13. Staff each case with the Multi-Disciplinary Clinical Consultation (MDCC) team within 20 working days in accordance with Human Service Center Licensure.
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(Revised 8/1/11 ML 3277)

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Services provided by the Human Service Centers or by community providers under this program shall include but are not limited to the following:

1. Individualized assessments to determine the needs and appropriate services;
2. Complete internal and external referrals according to human service policy;
3. Independent living skills including self-advocacy training;
4. Vocational rehabilitation services for transitioning students from high school to employment or post secondary education;
5. In-home support, mentors, individual and family training, and respite care;
6. Substance abuse assessment and treatment;
7. Psychological and psychiatric evaluation and treatment;
8. Individual, group, and family therapy services;
9. Case aid services;
10. Flexible funding;
11. Crisis residential services;
12. When appropriate utilize the Ansell Casey Life Skills a statewide independent living skills curriculum for youth and families listed below to assess independent living skills as appropriate.

<http://www.caseylifeskills.org/index.htm> (site overview)

http://www.caseylifeskills.org/pages/res/res_ACLSAGuidebook.htm#2 (guidebook)

<http://www.caseylifeskills.org/pages/lp/LSG%20Version%2012-28-04.pdf> (resources)

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Caseload Facilitation/Management 642-01-55

(Revised 8/1/11 ML 3277)

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1. Ratio of young people to transition facilitator does not exceed 15 to 1.

Supervisor will be responsible to take into consideration such factors as the following may necessitate requiring a lower ratio of young people per facilitator: The number of children dependent on the transition aged youth/young adult; travel time for service delivery; severity level of Emotional Behavior Disorder (E.B.D.), degree of risk vs. stability in their home, school, and/or employment placements; availability of developmentally-appropriate, appealing and effective supports and services in the community.

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Service Codes 642-01-60

(Revised 8/1/11 ML 3277)

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Transition to Independence RU #563

Service Code Manual: <P:\So Doit\ROAP Reference\CODING\Service Coding manual>

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Confidentiality Statement 642-01-65

(Revised 8/1/11 ML 3277)

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“The Department is committed to protecting your privacy. Any personal health information about you that is generated by this Department or received from health care providers will be kept confidential to the full extent required by the law. The law requires us to maintain the privacy of protected health information, to provide you with this notice, and to abide by what this notice says. We may change what this notice says but will provide you with information about any changes made if you are then receiving services from the Department or upon your request.” - North Dakota Department of Human Services/HIPAA DN900

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Release of Information 642-01-70

(Revised 8/1/11 ML 3277

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The multi-agency release of information, [SFN 970](#) or Authorization to Disclose Information [SFN 1059](#) will be completed.

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Grievance Procedure 642-01-75

(Revised 8/1/11 ML 3277)

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If for any reason, a youth/young adult is not satisfied with a service or how the case is being managed, a grievance can be filed. Human service center policy will be followed regarding this procedure.

Client Rights and Appeals 642-01-80

(Revised 8/1/11 ML 3277)

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Discrimination means treating someone differently because of a particular characteristic such as race, skin color, sex, age, disability, or religion.

In North Dakota, people applying for or participating in programs and activities funded by the federal Department of Health and Human Services and the North Dakota Department of Human Services cannot be discriminated against because of race, color, national origin, age, sex, religion, political affiliation, disability, or status with respect to marriage or public assistance.

Anyone who believes he or she has been discriminated against by service providers covered under these provisions has 180 days to file a complaint after an alleged discriminatory act. To file a complaint, complete the Civil Rights Complaint Form, [SFN 143](#).

If the youth/young adult is denied services for any reason, that information will be provided to them in writing. Please reference the above procedure for an appeal or grievance.

Termination from the Transition to Independence Program 642-01-85

(Revised 8/1/11 ML 3277)

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1. Individuals may choose to leave the program.
2. Upon reaching the age of 25, if an individual continues to need and request services, the individual will be referred to the appropriate service providers or agencies. If the individual is involved in therapy or other services at the human service center, the case would be transferred to the most appropriate staff.
3. If the individual is not participating in the program on a consistent, appropriate basis, they may be subject to termination. In this case, it's recommended that a staffing be held with the direct program supervisor to discuss the circumstances and make a decision. Results of the staffing will be documented in the case file.
4. If the individual "comes and goes" from the program, this is to be documented in the case file. The case will remain open in the meantime while attempts are made to re-engage the individual. The Transition Facilitator will document all attempts to contact individuals in case notes.
5. If safety of the Transition Facilitator or any other staff providing services is at risk, a staffing will be held to determine the ongoing provision of the program/services provided. The decision to close the case will be documented in the case file. Correspondence indicating case closure will be sent to the individual. A copy of the correspondence will be retained in the case file.
6. If the mental health of the individual deteriorates, it may be necessary to reassess for additional referrals and participation in the program.

Regional Transition to Independence Subcommittees 642-01-90

(Revised 8/1/11 ML 3277)

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A subcommittee will be formed in each of the eight human service center regions.

The transition facilitator will facilitate the regional transition to independence subcommittees and / or designate a subcommittee member to serve on the statewide transition advisory council.

Regional subcommittee will consist of representatives of the various system partners such as education, juvenile justice, child welfare, tribal representatives, vocational rehabilitation, parents and youth, partnerships care coordinator, adult mental health case management services, housing authority, and community action. Members are selected based on their knowledge, understanding, and interest in the needs of transition-aged youth at risk. The purpose of the regional subcommittee is to advise the regional human service center on program and policy issues, delivery of services, and methods for reaching consumers.

The regional subcommittee will meet on a regular basis (minimum of quarterly) as determined by the subcommittee and may combine with an already established transition committee.

Representation from the regional subcommittee will attend the State Wide Transition to Independence Interagency Council meetings and provide updates on a quarterly basis.

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State Wide Transition to Independence Interagency Advisory Council 642-01-95

(Revised 8/1/11 ML 3277)

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A statewide Transition to Independence Interagency Advisory Council will be established that consists of representatives of the various system partners such as education, juvenile justice, child welfare, tribal representatives, transition facilitators, vocational rehabilitation, legislative assembly, parents and youth. Members will be selected based on their knowledge, understanding, and interest in the needs of transition-aged youth/young adults who are at risk. The advisory council will advise the Department concerning program and policy issues, delivery of services, and methods for reaching potential consumers.

The state-wide Council will meet on a regular basis (quarterly) as determined by the council. The council will be facilitated by the program administrator from Mental Health & Substance Abuse.